

strengths for such fiscal year, and for other purposes; which was ordered to lie on the table; as follows:

At the appropriate place, insert the following:

TITLE —EMERGENCY PREPAREDNESS

SEC. 01. SHORT TITLE.

This title may be cited as the “Advancing Emergency Preparedness Through One Health Act of 2021”.

SEC. 02. FINDINGS.

Congress finds the following:

(1) The term “One Health” reflects the interconnectedness of human health, animal health, and the environment. As technology and population growth facilitates increased interaction of human settlements with wildlife habitats and as international travel and trade increases, the interface between these elements will also continue to rise.

(2) When zoonotic diseases spill over to humans, there are often enormous health and economic costs. The World Bank estimates that, between 1997 and 2009, the global costs from six zoonotic outbreaks exceeded \$80,000,000,000 and the Centers for Disease Control and Prevention estimates that there are annually 2,500,000,000 cases of zoonotic infections globally, resulting in 2,700,000 deaths.

(3) There are also immense effects on the agriculture sector. In 2014 and 2015, a high pathogenic avian influenza (HPAI) outbreak in the United States led to the cull of nearly 50,000,000 birds, and imposed up to approximately \$3,300,000,000 in losses for poultry and egg farmers, animal feed producers, baked good production, and other related industries.

(4) Public health preparedness depends on agriculture in a variety of ways. For example, a wide range of vaccines, including those for influenza, yellow fever, rabies, and measles-mumps-rubella (MMR), are primarily cultivated in poultry eggs. Egg shortages resulting from zoonotic disease outbreaks could impose serious risks to vaccine manufacturing efforts.

(5) It is estimated that approximately 80 percent of potential pathogens likely to be used in bioterrorism or biowarfare are common zoonotic pathogens.

(6) While existing Federal Government initiatives related to One Health span multiple agencies, including the Centers for Disease Control and Prevention One Health office and the Department of Agriculture Animal and Plant Health Inspection Services’ One Health Coordination Center, additional interagency coordination is necessary to help better prevent, prepare for, and respond to zoonotic disease outbreaks.

SEC. 03. INTERAGENCY ONE HEALTH PROGRAM.

(a) IN GENERAL.—The Secretary of the Interior, the Secretary of Health and Human Services, and the Secretary of Agriculture (referred to in this title as the “Secretaries”), in coordination with the United States Agency for International Development, the Environmental Protection Agency, the Department of Homeland Security, the Department of Defense, the Department of Commerce, and other departments and agencies as appropriate, shall develop, publish, and submit to Congress a national One Health Framework (referred to in this title as the “framework”) for coordinated Federal Activities under the One Health Program.

(b) NATIONAL ONE HEALTH FRAMEWORK.—

(1) IN GENERAL.—Not later than 1 year after the date of enactment of this Act, the Secretaries, in cooperation with the United States Agency for International Development, the Environmental Protection Agency, the Department of Homeland Security, the Depart-

ment of Defense, the Department of Commerce, and other departments and agencies as appropriate, shall develop, publish, and submit to Congress a One Health Framework (referred to in this section as the “framework”) for coordinated Federal activities under the One Health Program.

(2) CONTENTS OF FRAMEWORK.—The framework described in paragraph (1) shall describe existing efforts and contain recommendations for building upon and complementing the activities of the Department of the Interior, the Centers for Disease Control and Prevention, the Food and Drug Administration, the Office of the Assistant Secretary for Preparedness and Response, the Department of Agriculture, the United States Agency for International Development, the Environmental Protection Agency, the National Institutes of Health, the Department of Homeland Security, and other departments and agencies, as appropriate, and shall—

(A) assess, identify, and describe, as appropriate, existing activities of Federal agencies and departments under the One Health Program and consider whether all relevant agencies are adequately represented;

(B) for the 10-year period beginning in the year the framework is submitted, establish specific Federal goals and priorities that most effectively advance—

(i) scientific understanding of the connections between human, animal, and environmental health;

(ii) coordination and collaboration between agencies involved in the framework including sharing data and information, engaging in joint fieldwork, and engaging in joint laboratory studies related to One Health;

(iii) identification of priority zoonotic diseases and priority areas of study;

(iv) surveillance of priority zoonotic diseases and their transmission between animals and humans;

(v) prevention of priority zoonotic diseases and their transmission between animals and humans;

(vi) protocol development to improve joint outbreak response to and recovery from zoonotic disease outbreaks in animals and humans; and

(vii) workforce development to prevent and respond to zoonotic disease outbreaks in animals and humans;

(C) describe specific activities required to achieve the goals and priorities described in subparagraph (B), and propose a timeline for achieving these goals;

(D) identify and expand partnerships, as appropriate, among Federal agencies, States, Indian tribes, academic institutions, nongovernmental organizations, and private entities in order to develop new approaches for reducing hazards to human and animal health and to strengthen understanding of the value of an integrated approach under the One Health Program to addressing public health threats in a manner that prevents duplication;

(E) identify best practices related to State and local-level research coordination, field activities, and disease outbreak preparedness, response, and recovery related to One Health; and

(F) provide recommendations to Congress regarding additional action or legislation that may be required to assist in establishing the One Health Program.

(3) ADDENDUM.—Not later than 3 years after the creation of the framework, the Secretaries, in coordination with the agencies described in paragraph (1), shall submit to Congress an addendum to the framework that describes the progress made in advancing the activities described in the framework.

(c) AUTHORIZATION OF APPROPRIATIONS.—To carry out this section, there is authorized to be appropriated such sums as may be necessary.

SEC. 04. GAO REPORT.

Not later than 2 years after the date of the submission of the addendum under section 03(b)(3), the Comptroller General of the United States shall submit to Congress a report that—

(1) details existing collaborative efforts between the Department of the Interior, the Centers for Disease Control and Prevention, the Food and Drug Administration, the Department of Agriculture, the United States Agency for International Development, the Environmental Protection Agency, the National Institutes of Health, the Department of Homeland Security, and other departments and agencies to prevent and respond to zoonotic disease outbreaks in animals and humans; and

(2) contains an evaluation of the framework and the specific activities requested to achieve the framework.

SA 4807. Ms. SMITH (for herself, Mr. CASSIDY, and Ms. WARREN) submitted an amendment intended to be proposed to amendment SA 3867 submitted by Mr. REED and intended to be proposed to the bill H.R. 4350, to authorize appropriations for fiscal year 2022 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes; which was ordered to lie on the table; as follows:

At the end of subtitle G of title X, add the following:

SEC. 1064. STUDY AND REPORT ON THE REDISTRIBUTION OF COVID-19 VACCINE DOSES THAT WOULD OTHERWISE EXPIRE TO FOREIGN COUNTRIES AND ECONOMIES.

(a) STUDY.—

(1) IN GENERAL.—The Secretary of Health and Human Services, in consultation with the Secretary of State and the Administrator of the United States Agency for International Development, shall conduct a study to identify and analyze the logistical prerequisites for the collection of unused and unexpired doses of the COVID-19 vaccine in the United States and for the distribution of such doses to foreign countries and economies.

(2) MATTERS STUDIED.—The matters studied by the Secretary of Health and Human Services under paragraph (1) shall include—

(A) options for the collection of unused and unexpired doses of the COVID-19 vaccine from entities in the United States;

(B) methods for the collection and shipment of such doses to foreign countries and economies;

(C) methods for ensuring the appropriate storage and handling of such doses during and following the distribution and delivery of the doses to such countries and economies;

(D) the capacity and capability of foreign countries and economies receiving such doses to distribute and administer the doses while assuring their safety and quality;

(E) the minimum supply of doses of the COVID-19 vaccine necessary to be retained within the United States; and

(F) other Federal agencies with which the heads of the relevant agencies should coordinate to accomplish the tasks described in subparagraphs (A) through (E) and the degree of coordination necessary between such agencies.

(b) **REPORT REQUIRED.**—Not later than 180 days after the date of the enactment of this Act, the Secretary of Health and Human Services, in consultation with the other heads of the relevant agencies, shall submit to the appropriate congressional committees a report on the results of the study conducted under subsection (a).

(c) **DEFINITIONS.**—In this section:

(1) **APPROPRIATE CONGRESSIONAL COMMITTEES.**—The term “appropriate congressional committees” means—

(A) the Committee on Health, Education, Labor, and Pensions, and the Committee on Foreign Relations of the Senate; and

(B) the Committee on Energy and Commerce, and the Committee on Foreign Affairs of the House of Representatives.

(2) **RELEVANT AGENCIES.**—The term “relevant agencies” means—

(A) the Department of Health and Human Services;

(B) the Department of State; and

(C) the United States Agency for International Development.

SA 4808. Mrs. FEINSTEIN (for herself, Ms. ERNST, Mr. DURBIN, Ms. COLLINS, Ms. HIRONO, Ms. ROSEN, Mr. PETERS, Mr. CORNYN, and Ms. DUCKWORTH) submitted an amendment intended to be proposed to amendment SA 3867 submitted by Mr. REED and intended to be proposed to the bill H.R. 4350, to authorize appropriations for fiscal year 2022 for military activities of the Department of Defense, for military construction, and for defense activities of the Department of Energy, to prescribe military personnel strengths for such fiscal year, and for other purposes; which was ordered to lie on the table; as follows:

At the end of subtitle B of title XII, add the following:

SEC. 1216. STATUS OF WOMEN AND GIRLS IN AFGHANISTAN.

(a) **FINDINGS.**—Congress finds the following:

(1) Since May 2021, the escalation of violent conflict in Afghanistan has forcibly displaced an estimated 655,000 civilians, and 80 percent of those forced to flee are women and children.

(2) Since regaining control of Afghanistan in August 2021, the Taliban have taken actions reminiscent of their brutal rule in the late 1990s, including by cracking down on protesters, detaining and beating journalists, reestablishing the Ministry for the Promotion of Virtue and Prevention of Vice, and requiring women to study at universities in gender-segregated classrooms while wearing Islamic attire.

(3) Until the Taliban assumed control of the country in August 2021, the women and girls of Afghanistan had achieved much since 2001, even as insecurity, poverty, underdevelopment, and patriarchal norms continued to limit their rights and opportunities in much of Afghanistan.

(4) Through strong support from the United States and the international community—

(A) female enrollment in public schools in Afghanistan continued to increase through 2015, with an estimated high of 50 percent of school age girls attending; and

(B) by 2019—

(i) women held political leadership positions, and women served as ambassadors; and

(ii) women served as professors, judges, prosecutors, defense attorneys, police, military members, health professionals, journalists, humanitarian and developmental aid workers, and entrepreneurs.

(5) Efforts to empower women and girls in Afghanistan continue to serve the national interests of Afghanistan and the United States because women are sources of peace and economic progress.

(6) With the return of Taliban control, the United States has little ability to preserve the human rights of women and girls in Afghanistan, and those women and girls may again face the intimidation and marginalization they faced under the last Taliban regime.

(7) Women and girls in Afghanistan are again facing gender-based violence, including—

(A) forced marriage;

(B) intimate partner and domestic violence;

(C) sexual harassment;

(D) sexual violence, including rape; and

(E) emotional and psychological violence.

(8) Gender-based violence has always been a significant problem in Afghanistan and is expected to become more widespread with the Taliban in control. In 2020, even before the Taliban assumed control of the country, some studies projected that 87 percent of Afghan women and girls will experience at least one form of gender-based violence in their lifetime, with 62 percent experiencing multiple incidents of such violence.

(9) Prior to the Taliban takeover in August 2021, approximately 7,000,000 people in Afghanistan lacked or had limited access to emergency and primary health services as a result of inadequate public health coverage, weak health systems, and conflict-related interruptions in care.

(10) Women and girls faced additional challenges, as their access to prenatal, childbirth, and postpartum care was limited due to a shortage of female medical staff, cultural barriers, stigma and fears of reprisals following sexual violence, or other barriers to mobility, including security fears.

(11) Only approximately 50 percent of pregnant women and girls in Afghanistan deliver their children in a health facility with a professional attendant, which increases the risk of complications in childbirth and preventable maternal mortality.

(12) Food insecurity in Afghanistan is also posing a variety of threats to women and girls, as malnutrition weakens their immune systems and makes them more susceptible to infections, complications during pregnancy, and risks during childbirth.

(13) With the combined impacts of ongoing conflict and COVID-19, Afghan households increasingly resort to child marriage, forced marriage, and child labor to address food insecurity and other effects of extreme poverty.

(14) In Afghanistan, the high prevalence of anemia among adolescent girls reduces their ability to survive childbirth, especially when coupled with high rates of child marriage and forced marriage and barriers to accessing prenatal and childbirth services.

(b) **SENSE OF CONGRESS.**—It is the sense of Congress that—

(1) since 2001, organizations and networks promoting the empowerment of women and girls have been important engines of social, economic, and political development in Afghanistan;

(2) any future political order in Afghanistan should secure the political, economic, and social gains made by Afghan women and work to increase the equal treatment of women and girls;

(3) respecting the internationally recognized human rights of all people is essential to securing lasting peace and sustainable development in Afghanistan;

(4) in cooperation with international partners, the United States must endeavor to preserve the hard-won gains made in Afghan-

istan during the past two decades, particularly as related to the social, economic and political empowerment of women and girls in society;

(5) the continued provision of humanitarian assistance in Afghanistan should be targeted toward the most vulnerable, including for the protection, education, and well-being of women and girls;

(6) immediate and ongoing humanitarian needs in Afghanistan can only be met by a humanitarian response that includes formal agreements between local nongovernmental organizations and international partners that promotes the safe access and participation of female staff at all levels and across functional roles among all humanitarian actors; and

(7) a lack of aid would exacerbate the current humanitarian crisis and harm the well-being of women and girls in Afghanistan.

(c) **POLICY OF THE UNITED STATES REGARDING THE RIGHTS OF WOMEN AND GIRLS OF AFGHANISTAN.**—

(1) **IN GENERAL.**—It is the policy of the United States—

(A) to continue to support the internationally recognized human rights of women and girls in Afghanistan following the withdrawal of the United States Armed Forces from Afghanistan, including through mechanisms to hold all parties publicly accountable for violations of international humanitarian law and violations of such rights against women and girls;

(B) to strongly oppose any weakening of the political or economic rights of women and girls in Afghanistan;

(C) to use the voice and influence of the United States at the United Nations to promote, respect, and uphold the internationally recognized human rights of the women and girls of Afghanistan, including the right to safely work;

(D) to identify individuals who violate the internationally recognized human rights of women and girls in Afghanistan, such as by committing acts of murder, lynching, and grievous domestic violence against women, and to press for bringing those individuals to justice; and

(E) to systematically consult with Afghan women and girls on their needs and priorities in the development, implementation, and monitoring of humanitarian action, including women and girls who are part of the Afghan diaspora community.

(d) **HUMANITARIAN ASSISTANCE AND AFGHAN WOMEN.**—The Administrator of the United States Agency for International Development should work to ensure that Afghan women are employed and enabled to work in the delivery of humanitarian assistance in Afghanistan, to the extent practicable.

(e) **REPORT ON WOMEN AND GIRLS IN AFGHANISTAN.**—

(1) **IN GENERAL.**—Not later than 180 days after the date of the enactment of this Act, and every 180 days thereafter through 2024, the Secretary of State shall submit to the appropriate committees of Congress, and make available to the public, a report that includes the following:

(A) An assessment of the status of women and girls in Afghanistan following the departure of United States and partner military forces, including with respect to access to primary and secondary education, jobs, primary and emergency health care, and legal protections and status.

(B) An assessment of the political and civic participation of women and girls in Afghanistan.

(C) An assessment of the prevalence of gender-based violence in Afghanistan.

(D) A report on funds for United States foreign assistance obligated or expended during the period covered by the report to advance